

Application Form
IDENTITY CARD
College of Agricultural Engg. & Tech.

To

The Dean
College of Agril. Engg. & Tech.
PAU Ludhiana.

Subject: Issue of Identity card.

Sir,

I am a student of -----Programme of this college. I am in need of identity card. Kindly issue me the same. I shall be thankful to you. My particulars are given below in capital letters:

Name-----

Roll No.-----

Programme-----

Id No.-----

(To be filled in by the office)

Valid Up to-----

(To be filled in by the office)

Blood Group-----

Date of Birth-----

Permanent Home Address-----

Hosteller/Day scholar-----

Student Contact No.-----

Parents' Contact No.-----

Signature of the Student

Dated.....

Recommendation/comments of the Advisor-----

Advisor

Signature With Rubber Stamp of

Forward in original by hand through the applicant to the Tina studio,(98140-63709) Near Aastha Hospital, Krishna Nagar, Ludhiana. He is requested to prepare the Identity Card as per detail given above and to hand over the same in Academic Branch in the office of the undersigned by-----for issue to the concerned student.

Accounts Officer
College of Agril. Engg. & Tech.